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**CENTRAL INTELLIGENCE AGENCY**  
WASHINGTON, D.C. 20505

11 June 1981

Mr. Brian V. Kinney  
Chief, Declassification and  
Historical Research Branch  
Records Management Division  
Washington Headquarters Services  
Room 1 D 517, Pentagon  
Washington, D.C. 20301


Dear Mr. Kinney:

This is in reply to Mr. E.E. Lowry's letter of 13 April 1981, which forwarded to CIA for classification review under E.O. 12065 documents found in the systematic review of classified OSD documents.

This document, described as Medical Intelligence in the Armed Forces, 24 March 1949, Log No. 32800, Cy No 58 (S), with attachments, should remain classified at the CONFIDENTIAL level under Section 1-301(c) of Executive Order 12065. The document should be reviewed again in June 1991.

The document is returned to you herewith as requested.

Sincerely,

  
Chief, Classification Review Division  
Office of Information Services  
Directorate of Administration

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Attachment:

Medical Intelligence in the Armed Forces,  
24 March 1949, Log 32800 (S) w/attachments

Distribution:

Orig - Addressee, w/att.  
1 - Liaison w/Dept. of Defense, w/att.  
1 - Chrono w/o att.

Unclassified when  
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Attachment.

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DEPARTMENT OF DEFENSE  
WASHINGTON, HEADQUARTERS SERVICES  
WASHINGTON, D.C. 20301

13 APR 1981

MEMORANDUM FOR THE CHIEF, CLASSIFICATION REVIEW DIVISION, CENTRAL  
INTELLIGENCE AGENCY

SUBJECT: Request for Declassification Review

During the systematic review of all classified Office of the Secretary of Defense (OSD) documents over 20 years old, the Declassification and Historical Research Branch, Records Management Division, Directorate for Correspondence and Directives, Washington Headquarters Services, turned up the attached document(s).

The documents were either originated by your agency, contain information for which your agency is the classification authority, or are otherwise of interest to you.

It is therefore requested that your agency review the documents and recommend declassification, continued classification at the present or lesser level of classification, and/or review by other agencies. If your agency is recommending continued classification, in accordance with Paragraph 3-401, Executive Order 12065, it is requested that an authority for continued classification be specified, along with a date for the next review.

The time permitted by Executive Order 12065 to reach the point where all OSD documents over 20 years old have been reviewed, and the large volume of over 20 year old OSD documents, make it necessary to request your response within 60 days. In your response, you may wish to provide guidance with regard to what categories of information you do and do not wish to have referred to you in the future.

Your assistance in effecting this review will be most appreciated. Please return the documents to Mr. Brian V. Kinney, Chief, Declassification and Historical Research Branch, Records Management Division, Washington Headquarters Services, Room 1D517, Pentagon, Washington, D.C. 20301, upon completion of your review.

Without attachments, this memorandum is UNCLASSIFIED.

*E. E. Lowry Jr.*  
E. E. Lowry, Jr.  
OSD Records Administrator

Attachments (1)

- Agenda, 24 Mar 49, Log No 32800, Cy No 58 (S)

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National Military Establishment  
RESEARCH AND DEVELOPMENT BOARD  
COMMITTEE ON MEDICAL SCIENCES  
Washington 25, D.C.

Log No. 32800

Copy No. 53

MB 20/2 (Item 9--agenda for 6th Meeting)

24 March 1949

MEMORANDUM FOR: Chairman and Members (Including Deputies and Associates),  
Committee on Medical Sciences, RDB

Subject: Medical Intelligence in the Armed Forces

References: (a) MB 20/1 - Item 6B of agenda for 4th Meeting of  
Committee on Medical Sciences, Subject: "Report  
of Subcommittee on Medical Intelligence of the  
Hawley Committee with attachments:

MB 20/1 - Report of the Subcommittee on Medical  
Intelligence.

MB 20/1.1- Memo from Subcommittee on Medical  
Intelligence to Executive Secretary of  
Hawley Committee, dated 2 June 1948.

MB 20/1.2- Memo from Hawley Committee to S/D,  
dated 3 September 1948.

Attachments: (a) LB 20/2.1 - Memo from Executive Director, Committee  
on Medical Sciences to Executive Secretary,  
RDB, dated 20 Dec 1948, Subject: Medical  
Intelligence of the Armed Forces.

(b) EC 246/1 - Memo to Executive Council, RDB, from  
Chief, Technical Intelligence Branch,  
RDB, dated 1 February 1949, Subject:  
Medical Intelligence.

(c) EC 246/2 - Memo to Executive Council, RDB, from  
Chief, Technical Intelligence Branch  
dated 11 February 1949, Subject:  
Medical Intelligence.

(d) LB 20/2.2- Memo to Executive Director, Committee  
on Medical Sciences from Deputy Executive  
Secretary, RDB, dated 24 February 1949,  
Subject: Medical Intelligence.

This document contains information affecting the national defense  
of the United States within the meaning of the Espionage Laws,  
Title 18, U.S.C., Sections 793 and 794. The transmission or the  
revelation of its contents in any manner to an unauthorized person  
is prohibited by law.

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MB 20/2 (cont'd)

- (c) MB 20/2.3 - Memo to Committee on Medical Sciences from Technical Information Branch, RDB, dated 3 March 1949, Subject: Dulles Report on "The Central Intelligence Agency and National Organization for Intelligence" with excerpt of Dulles report as attachment
- (f) - Excerpts Concerning Medical Intelligence from the Report of the Eberstadt Committee of the Hoover Commission
- (g) MB 20/2.4 - Memo to the Director of Central Intelligence from the Secretary of Defense, dated 5 March 1949, Subject: Medical Intelligence

1. The Committee on Medical Sciences reviewed and endorsed the Hawley Committee report on medical intelligence in the Armed Forces (reference (a)) at its 4th meeting on 10 December 1948. As a result of this action, and in accordance with Committee instructions, the Executive Director of the Committee notified the Executive Secretary of the Board by memorandum dated 20 December 1948. This memorandum is presented as attachment (a). The Deputy Executive Secretary of the Board subsequently notified the Secretary of Defense of the Committee's endorsement of the subject report.

2. In memoranda dated 1 February 1949 (attachment (b)) and 11 February 1949 (attachment (c)), Mr. David Z. Beckler, Chief, Technical Information Branch, RDB registered a dissent against the Committee's endorsement of the subject report of the Hawley Committee and recommended to the Executive Council, RDB, that the Board not concur in the recommendations of the subject report. It was Mr. Beckler's opinion that 1.) a central group for medical intelligence should be housed within the organization of the CIA and 2.) either each Service continue to maintain a small medical intelligence section, or a combined medical intelligence branch be established in the Office of Scientific Intelligence of the CIA supported by qualified representatives of the Services.

3. After reviewing attachments (b) and (c) the Executive Council, in a memorandum dated 24 February 1949 (attachment (d)), requested the Committee on Medical Sciences to reconsider the subject report on medical

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MB 20/2 (cont'd)

intelligence and to prepare supplementary or revised comments. The Council particularly desired the Committee to reconsider the Hawley Committee report in light of information contained in the report of the Dulles Committee and in certain portions of reports of the Hoover Commission.

4. Although permission has not been granted for the Committee on Medical Sciences to review the Dulles report because of security classification, excerpts of this report, which are presented as attachment (c), have been prepared by the Technical Information Branch for your information.

5. In attachment (f) are presented excerpts pertaining to medical intelligence from the report (in 4 volumes) of the Eberstadt Committee of the Hoover Commission. The recommendations of this Committee provide for the RDB and CIA, as a joint undertaking, establishing within one or the other agency a unit to collect, collate, and evaluate scientific and medical intelligence.

6. Finally, the present status of medical intelligence in the Armed Forces and the fate of the Hawley Committee's report on this subject appears to be summed up in a memo dated 5 March 1949 from the Secretary of Defense to the Director of the CIA, and is presented as attachment (g). The S/D does not concur in the primary recommendation of the Hawley Committee report, namely, the creation of an Armed Forces Medical Intelligence Organization. In place of this type of organization, the S/D proposes 1.) that each of the Service intelligence agencies assign a medical officer to the CIA to become a part of the Office of Scientific Intelligence of the CIA and 2.) that the Services continue to perform medical intelligence activity peculiar to their requirements and maintain the staff necessary to carry out these responsibilities and handle the necessary relationship with the CIA. Thus, in addition to medical intelligence activities which have been and are being carried on within the Services, medical intelligence activities in CIA would be strengthened by the addition of three medical officers. While information is not yet available as to the internal organization of the medical intelligence unit proposed within the Office of Scientific Intelligence of the CIA for carrying out the functions (a) through (d) outlined in attachment (g), it is anticipated that [redacted] CIA Associate Member of the Committee on Medical Sciences will be prepared to present information on this point to the Committee in order to enable it to review the problem now at hand. Conferences with the Office of Scientific Intelligence, CIA, have led to the promise that [redacted] will also be prepared to discuss the probable division of functions of medical intelligence activities between the CIA and the National Military Establishment.

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MB 20/2 (cont'd)

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7. The memorandum will be taken up under Item 9 of the agenda for the 6th meeting of the Committee on Medical Sciences on 7 April 1949. In compliance with attachment (d), the Committee is requested to inform the Executive Director at this meeting as to the comments which it desires to make upon the subject Hawley Committee report in light of its previous endorsement and the subsequent events which have been presented above and in attachments (b) through (g).

*Joseph F. Sadusk, Jr.*  
JOSEPH F. SADUSK, JR., M. D.  
Executive Director  
Committee on Medical Sciences

cc. Executive Council, RDB

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MB 20/2.1

December 20, 1948

MEMORANDUM TO: Executive Secretary, RDB

SUBJECT: Medical Intelligence of the Armed Forces

REFERENCE: MB 20/1.2, Report of Committee on Medical and Hospital Services of the Armed Forces, Subject: "Medical Intelligence of the Armed Forces"

1. In compliance with your instructions of 7 October 1948, the reference above was presented to the Committee on Medical Sciences at its Fourth Meeting on 10 December 1948 for review and comments.

2. The reference report was reviewed and approved by the Committee on Medical Sciences, and the observation added that "only if fully implemented would the proposed organization be useful, especially to the purposes of medical research and development".

s/ Joseph F. Sadusk, Jr., M. D.  
JOSEPH F. SADUSK, JR., M. D.  
Executive Director  
Committee on Medical Sciences

cc, Item Control

Attachment (a)

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EO 346/1

1 February 1949

MEMORANDUM TO: Executive Council

FROM: Chief, Technical Intelligence Branch

SUBJECT: Medical Intelligence

1. At its fourth meeting on 10 December 1948, the RDB Committee on Medical Sciences unconditionally approved the Report of the Subcommittee on Medical Intelligence of the Hawley Committee. (Attached)

2. The Report recommends that an Armed Forces Medical Intelligence organization be established either (a) under a "Medical Coordinating Board" in the Office of the Secretary of Defense, or (b) as a Joint Services Medical Intelligence organization similar to the Armed Forces Medical Procurement Board.

3. It is the opinion of the Technical Intelligence Branch that if a central medical group is established, it should be housed within the framework of the Central Intelligence Agency, for the following reasons:

(a) Since the Hawley Committee Report was submitted, there has been a reorganization within the Central Intelligence Agency. There is now an Office of Scientific Intelligence Agency, headed by an Assistant Director for Scientific Intelligence. Within this office there has been instituted a Biology and Medicine Branch which includes a medical doctor.

(b) To set up an operating central medical intelligence group in OSD would be anomalous and organizationally unsound.

(c) More would be accomplished by setting up a Joint Services Medical Intelligence Group within CIA than an inter-service board handling its own administrative and liaison problems.

(d) One of the principal sources of foreign medical information is the State Department which is also an important consumer of medical intelligence. The State Department contributions and needs are best combined with similar military interests in the Central Intelligence Agency.

(e) Since one of the principal responsibilities of the CIA is to co-ordinate the activities of the departmental intelligence agencies, the formation of a central medical group within the NME would be repugnant to this CIA function. Placing the central medical intelligence group within CIA would properly locate the co-ordinating function.

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Attachment (b)

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EC 246/1

(f) The close relationship between medical, C/W, B/W, and R/W intelligence demands that the co-ordination of intelligence on these subjects be accomplished by a single agency.

4. It is recommended that the RDB not endorse the intelligence recommendations of the Hawley Committee, and that the following recommendations be adopted instead:

(a) That each Service maintain a small but effective medical intelligence section concentrating on those medical intelligence matters which are of primary concern to their respective Departments and that the Central Intelligence Agency co-ordinate the activities of these medical intelligence sections, allocating responsibility for matters of concern to more than one agency;

or

if shortages in personnel prevent the maintenance of independent medical intelligence sections within the three Services:

(b) that a combined Medical Intelligence Branch be established in the Office of Scientific Intelligence of the CIA, which will include representatives of the Services and which will satisfy the medical intelligence requirements of the Services as well as those of CIA and the Department of State.

DAVID Z. BECKLER  
Chief  
Technical Intelligence Branch

attachments:

Concur

RAIPH L. CLARK  
Director  
Programs Division

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Attachment (b)

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EC 246/2

11 February 1949

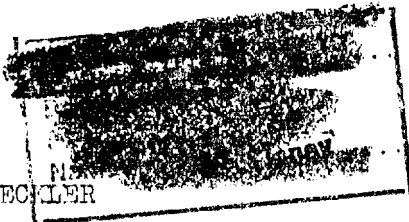
MEMORANDUM TO: Executive Council  
FROM: Chief, Technical Intelligence Branch  
SUBJECT: Medical Intelligence

1. This supplements my memorandum of 1 February 1949 commenting on the report of the Hawley Subcommittee on Medical Intelligence and recommending that the RDB not endorse the recommendations of that report.

2. I have discussed this matter with Mr. Robert Blum, Assistant to Secretary Forrestal on National Security Council matters, and Secretary to the Dulles Committee. Mr. Blum agreed with the criticisms and recommendations of the 1 February memorandum and said that it was substantially in accord with the thoughts of the Dulles Committee.

3. Mr. Blum discussed this matter with Dr. Richard L. Meiling, a member of the Medical Advisory Committee to the Secretary of Defense, who in turn contacted Adm. Hillenkoetter and Dr. Machle of CIA. The Directors of Intelligence of the Army and Navy have now agreed to assign medical intelligence officers for duty in the Office of Scientific Intelligence, CIA. The Air Force has not yet been heard from. According to the arrangements underway, CIA will be the central co-ordinating agency for medical intelligence.

4. Despite the fact that the recommendations relating to medical intelligence, now before the Executive Council, have now been implemented to a considerable degree; it is urged that the Council go on record as endorsing these recommendations in order to clarify the Board's position in this matter.

  
D. Z. BECHLER  
Chief  
Technical Intelligence Branch

cc. Ralph L. Clark  
Committee on Medical Intelligence

Attachment (c)

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MB 20/2.2

24 February 1949

MEMORANDUM TO EXECUTIVE DIRECTOR, COMMITTEE ON MEDICAL SCIENCES


Subject: Medical Intelligence

1. At its 94th meeting, the Council considered two memoranda from the Technical Intelligence Branch of Programs Division regarding the action of your Committee on the Report of the Subcommittee on Medical Intelligence of the Hawley Committee. Copies of both memoranda have been furnished your office.

2. The Report of the Dulles Committee was issued subsequent to that of the Hawley Subcommittee, and it appears that it would be advisable for your Committee to reconsider its previous action in the light of the Dulles report. Appropriate excerpts from, or an abstract of, that document will be made available for your study. Portions of the Hoover report are also pertinent.

3. The Council expressed some concern over your Committee's concurrence in the recommendation of the Hawley Subcommittee that a medical intelligence organization be established outside of the Central Intelligence Agency inasmuch as CIA is charged by law with coordinating intelligence activities of the entire government, and therefore will be held responsible for the NME area also. It is requested that the Committee on Medical Sciences reconsider its previous action on the Hawley Subcommittee report with a view to preparing further comments, for transmittal to Office of the Secretary of Defense, which will be more consistent with the legally assigned responsibilities of the CIA. The comments of the Technical Intelligence Branch, and the documents referenced in paragraph 2, should be taken into consideration in this connection. It is suggested that conferences be held with Dr. Machle of the CIA.

4. In view of the fact that Office of Secretary of Defense was advised on 14 December 1948 of your Committee's action, it is requested that preparation of supplementary or revised comments be expedited and forwarded to the Executive Council for consideration as soon as possible.

  
F. H. RICHARDSON  
Deputy Executive Secretary

Attachment (d)

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Copy No. \_\_\_\_\_

National Military Establishment  
THE RESEARCH AND DEVELOPMENT BOARD  
Washington 25, D.C.

MB 20/2.3

3 March 1949

MEMORANDUM TO: Committee on Medical Sciences  
Attention: James E. McCormack, M. D.

SUBJECT: Dulles Committee Report on "The Central  
Intelligence Agency and National Organiza-  
tion for Intelligence"

In my memorandum of 11 February 1949 to the Executive Council on the subject of Medical Intelligence, I made reference to the findings of the Dulles Committee. Although the Dulles report does not concern itself specifically with Medical Intelligence, the attached extracts are of interest in connection with the recommendations of the Hawley Committee.

s/ David Z. Beckler  
DAVID Z. BECKLER  
Chief  
Technical Intelligence Branch

Attachment:

Extracts from Report of  
Dulles Committee



Attachment (c)

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EXTRACTS

from

REPORT OF DULLES COMMITTEE

(which serve as a guide for Medical Intelligence Organization)

- A. "We believe that there is an obvious need for more centralization of scientific intelligence. Where centralization is not practical there should be the closest coordination among the existing agencies through the use of committees such as the present interdepartmental atomic energy intelligence committees.... A strong Scientific Branch, as a common service within the Central Intelligence Agency, would be the logical focal point for the coordination and appropriate centralization of scientific intelligence."
- B. "We have seen that within the Military Establishment there is no general machinery for intelligence coordination. The Secretary of Defense at present has no staff for this purpose or to do more than exercise very general supervision and control. He is able to initiate particular projects for coordination and has, in fact, done so with respect to the production of communications intelligence and the attache systems. He can also resolve particular controversies which cannot be settled at a lower level in the military Establishment....

"Although coordination has been attempted or accomplished by the Services, either on their own initiative or at the instigation of the Secretary of Defense, in limited areas such as those mentioned above, effective coordination of the Service intelligence agencies requires the over-all coordination of the activities of all intelligence agencies in the Government. This is a duty assigned to the Central Intelligence Agency in consultation with the Intelligence Advisory Committee."

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Attachment (c)

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Excerpts concerning medical intelligence  
from  
Report to the

(Hoover) Commission on Organization of the Executive Branch  
of the Government  
by the  
(Eberstadt) Committee on the National Security Organization  
15 November 1948

Vol. I  
R E P O R T

Preface  
Introduction  
Summary of Major Recommendations

IV. Research and Development

P.43 "(g) that the Research and Development Board and the Central Intelligence Agency, as a joint undertaking, establish immediately within one or the other agency, an efficient and capable unit to collect, collate, and evaluate scientific and medical intelligence, in order that our present glaring deficiencies in this field be promptly eliminated."

List of Findings and Conclusions  
Findings and Conclusions  
A. General Conclusions  
B. Specific Findings

P.131 "50. Intelligence is the First Line of Defense.....  
P.133 The committee is particularly concerned over the Nation's inadequacies in the fields of scientific and medical intelligence. There are difficulties peculiar to this situation which the Committee has not overlooked. Yet the vital importance of reliable and up-to-date scientific and medical information is such as to call for far greater efforts than appear to have been devoted to this essential need in the past.

"Suggestions were made to the Committee that the primary responsibility for the generation of scientific and medical intelligence should lie with the Research and Development Board. This conclusion was based upon the history of frustration of the one scientist (who has now resigned) charged with these duties in the Central Intelligence Agency.\* An intelligence Service, which must put a

\* The Committee has been advised that a replacement has been made

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Attachment (f)

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premium on anonymity, is unattractive to a scientist whose professional reputation is so dependent upon open contacts with other scientists and upon public expression of his own scientific views. Other elements of the National Military Establishment engage in specialized intelligence activities -- the Navy collecting naval data, the Air Force data peculiarly important to air power, the Army data about land armies -- and, therefore, it would be logical to equip the Research and Development Board with its own service, the fruits of which could be garnered and utilized by the Central Intelligence Agency as in the case of all the other agencies. This suggestion has considerable attractiveness, and perhaps in the future, if the scientific intelligence activities of the Central Intelligence Agency do not materially improve, it may have to be adopted. But it has two major disadvantages. The Research and Development Board, unlike the services, is not an operating agency; intelligence collection would put it into the operating field. Moreover, the establishment of still another intelligence activity would render more difficult the task of the Central Intelligence Agency's authority -- which needs strengthening rather than weakening. Accordingly, rather than recommending this course, the Committee felt that the Central Intelligence Agency and the Research and Development Board should in cooperation decide on the form and placement of scientific and medical intelligence and, above all, should proceed energetically to obtain a staff with competent and experienced personnel. This task, in the Committee's judgment, is an urgent one, demanding high priority in energy, resourcefulness and attention.

P. 134

"In reaching its conclusions, the Committee and its staff had the benefit of consultation with a group, appointed by the President, who are making an examination of the Central Intelligence Agency under the supervision of the National Security Council."

## Vol. II

## S T U D I E S

Chap. II. Central Intelligence Agency

P. 53

"Scientific Intelligence... Medical intelligence is virtually non-existent. Estimates of foreign potentialities made by various agencies are inadequate and contradictory... There is no physician\* and no mechanism for collecting or evaluating medical intelligence in CIA."

\* See previous footnote.

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Attachment (f)

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P.56

"Vigorous action is imperative to improve all facilities for evaluating and stimulating the collection of scientific intelligence. Outside the field of atomic energy this must be done by increasing the authority and support given to the official responsible for scientific intelligence within CIA whether he remain on a branch or be raised to office level. Non-technical as well as technical intelligence information contributed to the evaluation of foreign scientific developments. For this reason scientific intelligence including medical intelligence should be evaluated centrally where intelligence information of all kinds is immediately available."

## Vol. III

## S T U D I E S

--Chap. VIII. Medical Services and Hospitalization in the Military Services.

## 1. Introduction,

## II. Organization of Medical Services Within the Armed Forces.

## III. Coordination of Medical and Health Problems in the Office of the Secretary of Defense,

P.204

"Research and Development Board,...This Committee (Committee on Medical Sciences) should be one of the most active 'customers' for medical intelligence from the Central Intelligence Agency."

## IV. The Coordination of Civilian and Military Medical Requirements.

P.207

"The Central Intelligence Agency. Available evidence indicates that no medical man has been cleared and appointed in the Scientific Branch of Research and Estimates of the Central Intelligence Agency. The serious consequences that might result from failure to develop medical intelligence cannot be minimized. Medical information concerning the fields of special weapons, human physiology (factors limiting the engineering and technical advancement of aircraft and submarines), and pharmaceutical and therapeutic advances (related directly to economic and political warfare) is at present not available to the National Military Establishment. This information cannot be secured through orthodox channels. It demands the highest type of medical and scientific knowledge associated with an understanding of the national and political problems of the countries involved. Anonymity presents difficult professional obstacles to centering this type of intelligence in the Central Intelligence Agency. The problem, however, can be met if vigorous efforts are made to solve it.

P.208

## Vol. IV

## G E N E R A L I N D E X

End of Excerpts.

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Attachment (f)

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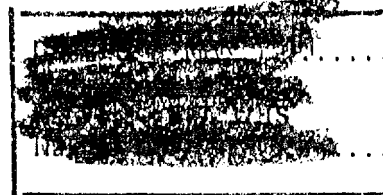
MB 20/2.4

5 March 1949

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Copy No. \_\_\_\_\_

MEMORANDUM FOR REAR ADMIRAL ROSCOE HILLENKOETTER  
DIRECTOR OF CENTRAL INTELLIGENCE

SUBJECT: Medical Intelligence



I understand that the question of establishing in the Central Intelligence Agency a medical intelligence unit comprising officers designated by the Armed Services will shortly be considered by the Intelligence Advisory Committee. Inasmuch as this question originated from certain actions taken by this office, I would like to bring my views to your attention, with the request that they be considered by the Intelligence Advisory Committee when it meets on this matter.

On 3 September 1948, the Committee on Medical and Hospital Services of the Armed Forces (Hawley Committee) recommended to me the creation of an Armed Forces Medical Intelligence Organization. This recommendation was endorsed by the Secretaries of the Army, Navy and Air Force. I therefore referred the Hawley Committee recommendations to the newly created Medical Advisory Committee of which Mr. Charles Cooper is Chairman.

After a series of discussions between Mr. Cooper, members of his Committee, yourself and members of my staff, it seemed that in place of the type of organization recommended by the Hawley Committee, it would be preferable for each one of the Service intelligence agencies, in consultation with the respective senior Service medical officer, to assign a medical officer to the Central Intelligence Agency. The three medical officers so assigned would become part of the Office of Scientific Intelligence. This proposal was discussed with the heads of the Service Intelligence agencies who indicated their general concurrence therein, subject to working out the necessary details and the precise definition of functions of the proposed medical intelligence unit. I understand that it is now felt that further discussions with a view to arriving at an agreement can be best carried on through the medium of the Intelligence Advisory Committee.

I would like to emphasize the importance of providing medical intelligence with the stimulus it needs through its close association with the

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MB 20/2.4 -- continued

other intelligence activities carried on by the Central Intelligence Agency and the strengthening and effective coordination of the separate Service efforts.

In my view, the proposed medical intelligence unit in the Central Intelligence Agency would contribute to these objectives by performing the following functions:

- (a) Stimulate and guide the program for the collection of current scientific medical intelligence information.
- (b) Evaluate the information received and produce current and staff intelligence therefrom for the benefit of the various intelligence agencies.
- (c) Assemble and transmit from Central Intelligence Agency sources information required by the medical intelligence officers of the respective Services.
- (d) Be responsible for the regular and frequent briefing of their respective intelligence agencies on all scientific medical matters of current importance.

The three Service medical intelligence officers in the Central Intelligence Agency would be working in close touch with related scientific intelligence activity, and the value of their work would be enhanced by this relationship. They would also be well placed to guide and to draw upon the facilities of the Central Intelligence Agency and the other intelligence agencies. Although these officers would be, operationally and administratively, a part of the Central Intelligence Agency, they should remain in close touch with their respective Services in order to be responsive to the needs of the Services and to assist them in any manner possible. The Services would continue to perform medical intelligence activity peculiar to their requirements and maintain the staff necessary to carry out these responsibilities and handle the necessary relationship with the Central Intelligence Agency.

I would appreciate it if you would bring these views to the attention of the Intelligence Advisory Committee and express to the Committee my hope that agreement on a program of medical intelligence may be promptly achieved.

/s/ James Forrestal  
James Forrestal

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Attachment (g)

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MB 20/2.4 -- continued

cc: Maj. Gen. S. L. Irwin,  
Director of Intelligence, Army

Maj. Gen. C. P. Cabell,  
Director of Intelligence, Air Force

Rear Adm. T. B. Inglis,  
Director of Intelligence, Navy

Attachment (g)

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